



ADVISORY

No. 214

June 17, 2020

Maryland's Preferred Drug List - July 1, 2020

Generic vs. Brand Status on Maryland's Preferred Drug List

Maryland Medicaid's Preferred Drug List (PDL), encompassing over 1800 drugs, covers most of the generic versions of preferred multisource brand drugs without any type of prior authorization. If the prescription for a brand name drug is to be dispensed as written, the prescriber must complete and submit a Medwatch form

(<https://mmcp.health.maryland.gov/pap/docs/Maryland%20Medwatch%20Form.pdf>). The State's clinical pharmacy team will review the Medwatch form and notify the prescriber whether the request for the brand name drug was approved or denied. The State will forward the Medwatch form to the FDA when appropriate.

The Office of Pharmacy Services (OPS), formulary known as the Maryland Medicaid Pharmacy Program wants to alert you to changes in the exceptions to this rule that are included in the attached updated Preferred Drug List, **effective July 1, 2020. The following brand name insulin medications are preferred over their corresponding generics: Humalog Junior Kwikpen, Humalog Mix 75/25 pen, Humalog pen and vial, Novolog cartridge, pen, vial and Novolog Mix 70/30.**

Claims for these brand name insulin medications must be submitted with DAW 6 code and will be priced appropriately. A Maryland Department of Health (MDH) Medwatch form will not be required. Claims with any other DAW code will reject.

Please refer to our website for a complete list of the PDL at the following link:
<https://mmcp.health.maryland.gov/pap/pages/Preferred-Drug-List.aspx>

In an effort to give timely notice to the pharmacy community concerning important pharmacy topics, the Maryland Department of Health (**MDH**) **Office of Pharmacy Services (OPS)** has developed the **Maryland Medicaid Pharmacy Program Advisory**.

To expedite information timely to the pharmacy and prescriber communities, an email network has been established which incorporates the email lists of the Maryland Pharmacists Association, EPIC, CARE, Long Term Care Consultants, headquarters of all chain drugstores and prescriber associations and organizations.

It is our hope that the information is disseminated to all interested parties. If you have not received this email through any of the previously noted parties or via MDH, please contact the OPS representative at 410-767-1455.

Not All Generics are Preferred

In order for the State to enhance the benefit of the PDL, in some instances when manufacturer rebates are taken into consideration, the multisource brand name drug is Preferred over its generic equivalent because the branded drug is more cost effective to the State than its generic counterpart. When the brand name drug is Preferred, no Medwatch nor authorization is needed¹. Enter a **DAW code of 6** on the claim to have it correctly priced. If any problems are encountered during the on-line claim adjudication of Preferred Brands, contact Conduent's 24-hour Help Desk at 800-932-3918 for additional system overrides related to the use of the correct DAW code (For example, when there is other insurance). Please maintain this Advisory as a reference in addition to any updates that follow.

The Brand Preferred exceptions are as follows:

Preferred BRAND	Non-Preferred GENERIC
Cellcept Oral suspension	mycophenolate mofetil oral suspension
Copaxone 20mg/ml	glatiramer acetate
Focalin XR capsules	dexamethylphenidate XR capsules
Gabitril tablets	tiagabine tablets
Humalog Junior Kwikpen	insulin lispro Junior Kwikpen
Humalog Mix 75/25 pen	insulin lispro mix pen
Humalog pen, vial	insulin lispro pen, vial
Kitabis Pak	tobramycin pak
Novolog cartridge, pen, vial	insulin aspart cartridge, pen, vial
Novolog Mix 70/30 pen, vial	insulin aspart protamine/insulin aspart pen, vial
Prevacid Solutabs ODT	lansoprazole ODT
ProAir HFA inhalation	albuterol HFA inhalation
Pulmicort 1mg/2ml respules	budesonide inhalation 1mg/2ml suspension
Revatio oral suspension ²	sildenafil oral suspension ²
Sabril powder packet ²	vigabatrin powder packet ²
Sabril tablets ²	vigabatrin tablets ²
Suboxone film	buprenorphine/naloxone film
Tegretol oral suspension	carbamazepine oral suspension
Transderm-Scop transdermal patches ³	scopolamine transdermal patches ³

Generic vs. Brand Status of Non-PDL Medications

Preferred BRAND	Non-Preferred GENERIC
Norvir Tablets	ritonavir tablet

¹ Unless the Program has established clinical criteria for the drug. Clinical Criteria can be found by going to the below link: <https://mmcp.health.maryland.gov/pap/Pages/Clinical-Criteria.aspx>

² Is a non-preferred drug on the PDL and will require a prior authorization by the prescriber

³ Both brand and generic preferred



Office of Pharmacy Services
Medicaid Pharmacy Program
Preferred Drug List

Effective Date: 7/1/2020

Only drugs that are part of the listed therapeutic categories are affected by the Medicaid Preferred Drug List (PDL). Therapeutic categories not listed here are not part of the PDL and will continue to be covered as they always have for Maryland Medicaid participants.

Note: Brand names listed in parentheses are only listed as a reference. For most multi-source products, the generic products are usually preferred and the branded innovator product is non-preferred. If a generic product is non-preferred, the corresponding brand product is also non-preferred except where specifically noted as “**(generic only)**”. PDL products that are new to market require prior authorization until they are reviewed. **Changes in the Preferred Drug List are highlighted in yellow.**

ANALGESICS

Drug Class	Preferred	Requires Prior Authorization
Analgesics, Narcotics (Long Acting) All drugs in this class are subject to review through the Opioid Drug Utilization Review Program .	fentanyl patches (All strengths except 37.5mcg, 62.5 mcg, 87.5 mcg) ^{cc,ql} morphine sulfate SR (MS Contin) ^{ql} Xtampza ER	buprenorphine patch (Butrans) ^{ql} fentanyl 37.5 mcg, 62.5 mcg, 87.5 mcg patches ^{cc,ql} hydrocodone ER (Zohydro ER) ^{cc,ql} hydromorphone ER (Exalgo) ^{ql} methadone (Dolophine) ^{ql} morphine sulfate ER (Avinza) ^{ql} morphine sulfate ER (Kadian) ^{ql} oxycodone ER (Oxycontin) ^{ql} oxymorphone ER (Opana ER) ^{ql} tramadol ER (Conzip, Ryzolt, Ultram ER) ^{ql} Arymo ER Belbuca Embeda Hysingla ER ^{cc,ql} Morphabond ER Nucynta ER ^{ql}

cc-Clinical criteria can be found at the link [here](#)

ql- Quantity limits can be found at the link [here](#)

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ANALGESICS

Drug Class	Preferred	Requires Prior Authorization
Analgesics, Narcotics (Short Acting) All drugs in this class are subject to review through the Opioid Drug Utilization Review Program .	acetaminophen/codeine (Tylenol w/ codeine) ^{ql} butalbital/acetaminophen/codeine/caffeine ^{ql} codeine tablets hydrocodone/acetaminophen tablets (Lorcet, Norco, Vicodin) ^{ql} hydromorphone tablets (Dilaudid) morphine sulfate tablets, solution oxycodone capsules, tablets, solution oxycodone/acetaminophen (Percocet) ^{ql} tramadol (Ultram) ^{ql} tramadol/acetaminophen (Ultracet) ^{ql}	benzhydrocone/acetaminophen (Apadaz) butalbital/aspirin/codeine/caffeine ^{ql} butorphanol nasal spray carisoprodol/codeine/aspirin dihydrocodeine/acetaminophen/caffeine fentanyl buccal (Actiq) ^{cc,ql} hydrocodone/acetaminophen solution (Lortab) ^{ql} hydrocodone/ibuprofen (Vicoprofen) hydromorphone solution, suppositories levorphanol meperidine (Demerol) morphine suppositories oxycodone syringe oxycodone/acetaminophen (Prolate) ^{ql} oxycodone concentrated solution oxycodone/aspirin (Percodan) oxycodone/ibuprofen (Combunox) oxymorphone (Opana) pentazocine/naloxone (Talwin NX) Abstral ^{cc,ql} Fentora ^{cc,ql} Nucynta Oxaydo Roxybond
Anti-Migraine Agents, Other *Appears in 2 places within PDL document .	Ajovy (Step Therapy) ^{cc,ql} Emgality 120mg/mL (Step Therapy) ^{cc,ql}	Aimovig (Step Therapy) ^{cc,ql} Emgality 100mg/mL (Step Therapy) ^{cc,ql} Nurtec ODT Reyvow Ubrelvy

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Drug Class	Preferred	Requires Prior Authorization
Anti-Migraine Agents, Triptans	rizatriptan, rizatriptan ODT (Maxalt, Maxalt MLT) ^{ql} sumatriptan nasal, syringe, tablets, vial (Imitrex) ^{ql}	<i>almotriptan (Axert)^{ql}</i> <i>eletiptan (Relpax)^{ql}</i> <i>frovatriptan (Frova) ^{ql}</i> <i>naratriptan (Amerge)^{ql}</i> <i>sumatriptan kit (Imitrex)^{ql}</i> <i>sumatriptan/naproxen (Trexiomet)^{ql}</i> <i>zolmitriptan, zolmitriptan ODT (Zomig, Zomig ZMT)^{ql}</i> <i>Migranow Kit</i> <i>Onzetra Xsail</i> Tosymra <i>Zembrace Symtouch</i> <i>Zomig nasal^{ql}</i>
Neuropathic Pain	capsaicin OTC duloxetine (Cymbalta) ^{cc,ql} gabapentin capsules, tablets (Neurontin) lidocaine patch (Lidoderm) ^{ql} pregabalin capsules ^{ql}	<i>duloxetine 40mg (Irenka)^{ql}</i> <i>gabapentin solution (Neurontin)</i> <i>pregabalin solution</i> <i>DermacinRx PHN Pak</i> Drizalma Sprinkle Gabacaine Kit <i>Gralise</i> <i>Horizant</i> <i>Lidopure</i> <i>Lyrica CR</i> <i>Qutenza Kit</i> <i>Savella</i> <i>Zilacaine Patch</i> <i>ZTlido</i>

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Drug Class	Preferred	Requires Prior Authorization
Nonsteroidal Anti-Inflammatories (NSAIDS)	diclofenac (Cataflam) diclofenac gel (Voltaren Gel) ibuprofen Rx, OTC (Motrin) indomethacin (Indocin) meloxicam tablets (Mobic) nabumetone (Relafen) naproxen Rx, OTC (Aleve, Naprosyn) sulindac (Clinoril)	<i>celecoxib (Celebrex)</i> <i>diclofenac epolamine patch (Flector)ccal</i> <i>diclofenac potassium (Zipsor)</i> <i>diclofenac topical solution (Pennsaid)</i> <i>diclofenac/capsicum oleoresin kit</i> <i>diclofenac/misoprostol (Arthrotec)</i> <i>diclofenac SR (Voltaren XL)</i> <i>diflunisal (Dolobid)</i> <i>etodolac, etodolac XL (Lodine, Lodine XL)</i> <i>fenoprofen</i> <i>flurbiprofen (Ansaid)</i> <i>ibuprofen chewable tabs OTC</i> <i>indomethacin ER (Indocin SR)</i> <i>ketoprofen, ketoprofen ER (Orudis, Oruvail)</i> <i>ketorolac (Toradol)</i> <i>ketorolac nasal spray (Sprix)</i> <i>meclofenamate (Meclofen)</i> <i>mefenamic acid (Ponstel)</i> <i>meloxicam suspension</i> <i>naproxen/esomeprazole (Vimovo)</i> <i>naproxen sodium RX</i> <i>naproxen CR, Suspension</i> <i>oxaprozin (Daypro)</i> <i>piroxicam (Feldene)</i> <i>tolmetin, tolmetin DS (Tolectin, Tolectin DS)</i> <i>Duexis</i> <i>Indocin suppositories, suspension</i> <i>Pennsaid Pump</i> <i>Qmiiz ODTccal</i> Relafen DS <i>Tivorbex</i> <i>Vivlodex</i> <i>Xrylix Kit</i> <i>Zorvolex</i>

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ANALGESICS

Drug Class	Preferred	Requires Prior Authorization
Opioid Use Disorder Treatments	buprenorphine (Subutex) ^{cc,ql} naloxone (Narcan) naltrexone (Revia) ^{cc} Bunavail ^{ql} Narcan nasal spray Sublocade ^{cc,ql} Suboxone film (Brand only) ^{ql} Vivitrol ^{cc,ql} Zubsolv ^{ql}	buprenorphine/naloxone film (Suboxone) (generic only) ^{ql} buprenorphine/naloxone tablets (Suboxone) ^{ql} <i>Lucemyra</i> ^{ql}
Skeletal Muscle Relaxants	baclofen (Lioresal) chlorzoxazone (Parafon) cyclobenzaprine (Flexeril) ^{ql} methocarbamol (Robaxin) orphenadrine ER (Norflex) tizanidine tablets (Zanaflex)	<i>carisoprodol</i> (<i>Soma</i>) <i>carisoprodol compound</i> (<i>Soma Compound</i>) <i>cyclobenzaprine ER</i> (<i>Amrix</i>) ^{ql} <i>dantrolene</i> (<i>Dantrium</i>) <i>metaxalone</i> (<i>Skelaxin</i>) <i>tizanidine capsules</i> (<i>Zanaflex</i>) <i>Lorzone</i> <i>Norgesic Forte</i>

ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Antibiotics, GI	metronidazole tablets (Flagyl) neomycin vancomycin capsules (Vancocin) Firvanq	<i>metronidazole capsules</i> (<i>Flagyl capsules</i>) <i>paromomycin</i> <i>tinidazole</i> (<i>Tindamax</i>) vancomycin solution <i>Diflucan</i> ^{cc,ql} <i>Solosec</i> <i>Xifaxan</i> ^{cc,ql}
Antibiotics, Inhaled	Bethkis ^{cc,ql} Kitabis Pak (Brand only) ^{cc,ql} Tobi Podhaler (Step therapy) ^{cc,ql}	<i>tobramycin inhalation solution</i> (<i>Tobi</i>) ^{cc,ql} <i>tobramycin pak</i> (<i>Kitabis</i>) (generic only) ^{cc,ql} <i>Arikayce</i> ^{cc,ql} <i>Cayston</i> ^{cc,ql}
Antibiotics, Topical	bacitracin OTC gentamicin mupirocin ointment (Bactroban Ointment) neomycin/polymyxin/pramoxine OTC triple antibiotic OTC	<i>mupirocin cream</i> (<i>Bactroban Cream</i>) <i>Centany</i>

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ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Antibiotics, Vaginal	clindamycin (Cleocin) metronidazole vaginal (Metrogel) Cleocin ovules Clindesse Nuvessa	<i>Vandazole</i>
Antifungals, Oral	clotrimazole troches (Mycelex) fluconazole (Diflucan) griseofulvin suspension (GriFulvin V) ketoconazole (Nizoral) nystatin suspension, tablets terbinafine (Lamisil)	<i>flucytosine (Ancobon)</i> <i>griseofulvin tablets (Gris Peg, GriFulvin V)</i> <i>itraconazole (Sporanox)</i> <i>posaconazole (Noxafil)</i> <i>voriconazole (Vfend)</i> <i>Cresemba</i> <i>Onmel</i> <i>Oravig</i> <i>Tolsura</i>
Antifungals, Topical	clotrimazole Rx, OTC clotrimazole/betamethasone cream (Lotrisone) ketoconazole cream, shampoo (Nizoral) miconazole cream OTC nystatin nystatin/triamcinolone (Mycolog) terbinafine OTC tolnaftate OTC	<i>ciclopirox (Loprox,Loprox Kit,Loprox Shampoo,Penlac)</i> <i>clotrimazole/betamethasone lotion (Lotrisone)</i> <i>econazole (Spectazole)</i> <i>ketoconazole foam (Ketodan)</i> <i>luliconazole (Luzu)^{cc,ql}</i> <i>miconazole ointment, powder, spray OTC</i> <i>miconazole nitrate/zinc oxide/petrolatum (Vusion)</i> <i>naftifine (Naftin)</i> <i>oxiconazole cream (Oxistat)</i> <i>Alevazol OTC</i> <i>Bensal HP</i> <i>DermacinRx Therazole Pak</i> <i>Desenex spray powder</i> <i>Ertaczo</i> <i>Exelderm</i> <i>Fungoid OTC</i> <i>Jublia</i> <i>Kerydin</i> <i>Lamisil OTC</i> <i>Lotrimin AF, Ultra OTC</i> <i>Mentax</i> <i>Oxistat lotion</i>

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ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Antiparasitics, Topical	permethrin Rx, OTC (Elimit, Acticin) piperonyl/pyrethrins OTC	<i>lindane shampoo</i> ^{cc} <i>malathion (Ovide)</i> ^{cc ql} <i>spinosad (Natroba)</i> ^{cc ql} <i>Eurax</i> <i>Sklice</i> ^{cc ql}
Antivirals, Oral	acyclovir (Zovirax) oseltamivir (Tamiflu) ^{ql} valacyclovir (Valtrex)	<i>famciclovir (Famvir)</i> <i>rimantadine (Flumadine)</i> <i>Relenza</i> <i>Sitavig</i> <i>Xofluza</i>
Antivirals, Topical	acyclovir cream (Zovirax) docosanol 10% cream (Abreva OTC)	<i>acyclovir ointment (Zovirax ointment)</i> <i>Denavir</i> <i>Xerese</i>
Cephalosporins and Related Antibiotics	amoxicillin/clavulanate tablets, suspension (Augmentin, Augmentin ES) cefaclor capsules (Ceclor) cefadroxil capsules (Duricef) cefdinir (Omnicef) cefprozil (Cefzil) cefuroxime tablets (Ceftin) cephalexin capsules, suspension (Keflex)	<i>amoxicillin/clavulanate chewable tablets (Augmentin)</i> <i>amoxicillin/clavulanate ER (Augmentin XR)</i> <i>cefaclor suspension, ER tablets (Ceclor, Ceclor CD)</i> <i>cefadroxil suspension, tablets (Duricef)</i> <i>cefixime capsules, suspension (Suprax)</i> <i>cefpodoxime (Vantin)</i> <i>cephalexin tablets (Keflex)</i> <i>Augmentin 125 suspension</i> <i>Suprax chewable</i>
Fluoroquinolones, Oral	ciprofloxacin tablets (Cipro) levofloxacin tablets (Levaquin)	<i>ciprofloxacin suspension (Cipro)</i> <i>levofloxacin solution (Levaquin)</i> <i>moxifloxacin (Avelox)</i> <i>ofloxacin (Floxin)</i> <i>Baxdela</i>
Hepatitis B Agents	entecavir (Baraclude) lamivudine HBV (Epivir HBV)	<i>adefovir dipivoxil (Hepsera)</i> <i>Baraclude solution</i> <i>Vemlidy</i>
Hepatitis C Agents	ribavirin (Copegus, Rebetol) ledipasvir/sofosbuvir (Harvoni) ^{cc} sofosbuvir/velpatasvir (Epclusa) ^{cc} Mavyret ^{cc} Pegasys PegIntron Vosevi ^{cc} Zepatier ^{cc}	<i>Daklinza</i> ^{cc} <i>Ribapak</i> <i>RibaspHERE</i> <i>Sovaldi</i> ^{cc} <i>Viekira Pak</i> ^{cc}

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ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Macrolides/Ketolides	azithromycin (Zithromax) clarithromycin tablets (Biaxin) erythromycin base capsule DR erythromycin ethyl succinate oral suspension (EryPed, E.E.S) Ery-Tab	<i>clarithromycin suspension (Biaxin)</i> <i>clarithromycin ER (Biaxin XL)</i> <i>erythromycin base tablet</i> <i>erythromycin ethylsuccinate tablet (EES 400)</i> <i>Erythrocin</i>
Tetracyclines	doxycycline hyclate (Vibramycin) doxycycline monohydrate 50mg, 100mg capsules(Monodox) doxycycline monohydrate tablets minocycline capsules (Minocin) tetracycline (Sumycin)	<i>demeclercycline (Declomycin)</i> <i>doxycycline hyclate DR (Doryx)</i> <i>doxycycline monohydrate capsules 75mg, 150mg</i> <i>doxycycline monohydrate suspension (Vibramycin)</i> <i>minocycline tablets</i> <i>minocycline ER (Solodyn, Ximino)</i> <i>Doryx MPC</i> <i>Morgidox Kit</i> <i>Nuzyra</i> <i>Vibramycin syrup</i>

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BLOOD MODIFIERS

Drug Class	Preferred	Requires Prior Authorization
Antihyperuricemics	allopurinol (Zyloprim) probenecid probenecid/colchicine	<i>colchicine capsules (Mitigare)</i> ^{ql} <i>colchicine tablets (Colcrys)</i> ^{ql} <i>febuxostat (Uloric)</i> Gloperba
Colony Stimulating Factors	Granix Neupogen	<i>Fulphila</i> <i>Leukine</i> <i>Neulasta</i> <i>Nivestym</i> <i>Udenyca</i> <i>Zarxio</i> Ziextenzo
Erythropoiesis Stimulating Proteins	Aranesp Retacrit	<i>Epogen</i> <i>Mircera</i> <i>Procrit</i> Reblozyl
Phosphate Binders	calcium acetate (PhosLo) sevelamer carbonate (Renvela) Calphron OTC	<i>lanthanum carbonate (Fosrenol)</i> <i>sevelamer carbonate powder pack (Renvela)</i> <i>sevelamer HCl (Renagel)</i> <i>Auryxia</i> <i>Fosrenol powder pack</i> <i>Magnebind 400 Rx</i> <i>Phoslyra</i> <i>Velphoro</i>

CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Angiotensin Modulator Combinations	amlodipine/benzapril (Lotrel) amlodipine/valsartan (Exforge) amlodipine/valsartan/HCTZ (Exforge HCT)	<i>amlodipine/olmesartan (Azor)</i> <i>amlodipine/olmesartan/HCTZ (Tribenzor)</i> <i>amlodipine/telmisartan (Twynsta)</i> <i>trandolapril/verapamil (Tarka)</i>

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CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Angiotensin Modulators	benazepril, benazepril/HCTZ (Lotensin, Lotensin HCT) enalapril, enalapril/HCTZ (Vasotec, Vaseretic) irbesartan, irbesartan/HCTZ (Avapro, Avalide) lisinopril, lisinopril/HCTZ (Prinivil, Zestril, Prinzide, Zestoretic) losartan, losartan/HCTZ (Cozaar, Hyzaar) olmesartan, olmesartan/HCTZ (Benicar, Benicar HCT) quinapril, quinapril/HCTZ (Accupril, Accuretic) ramipril (Altace) valsartan, valsartan/HCTZ (Diovan, Diovan HCT) Entresto ^{cc,ql}	<i>aliskiren (Tekturna)</i> <i>candesartan, candesartan/HCTZ (Atacand, Atacand HCT)</i> <i>captopril, captopril/HCTZ (Capozide)</i> <i>eprosartan (Teveten)</i> <i>fosinopril, fosinopril/HCTZ (Monopril, Monopril HCT)</i> <i>moexipril (Univasc)</i> <i>perindopril (Aceon)</i> <i>telmisartan, telmisartan/HCTZ (Micardis, Micardis HCT)</i> <i>trandolapril (Mavik)</i> <i>Edarbi, Edarbyclor</i> <i>Epaned solution</i> <i>Qbrelis</i> <i>Tekturna HCT</i>
Anticoagulants	enoxaparin (Lovenox) ^{ql} warfarin (Coumadin) Eliquis tablets Pradaxa ^{ql} Xarelto Dose Pack Xarelto tablets (except 2.5 mg)	<i>fondaparinux (Arixtra)^{ql}</i> <i>Eliquis Dose Pack</i> <i>Fragmin^{ql}</i> <i>Savaysa</i> <i>Xarelto 2.5 mg tablets^{cc,ql}</i>
Antihypertensives, Sympatholytics	clonidine patch (Catapres TTS) ^{ql} clonidine tablet (Catapres) guanfacine (Tenex) methyldopa (Aldomet)	<i>methyldopa/HCTZ (Aldoril)</i>
Beta Blockers	atenolol, atenolol/chlorthalidone (Tenormin, Tenoretic) bisoprolol (Zebeta) bisoprolol/HCTZ (Ziac) carvedilol (Coreg) labetalol (Normodyne, Trandate) metoprolol succinate XL (Toprol XL) metoprolol tartrate (Lopressor) nadolol (Corgard) propranolol (Inderal) propranolol LA (Inderal LA) sotalol, sotalol AF (Betapace, Betapace AF)	<i>acebutolol (Sectral)</i> <i>betaxolol (Kerlone)</i> <i>carvedilol ER (Coreg CR)</i> <i>metoprolol/HCTZ (Lopressor HCT)</i> <i>nadolol/bendroflumethiazide (Corzide)</i> <i>pindolol (Visken)</i> <i>propranolol/HCTZ (Inderide)</i> <i>timolol (Blocadren)</i> <i>Bystolic</i> <i>Hemangeol</i> <i>Kapspargo</i> <i>Sotylyze</i>

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CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Calcium Channel Blockers	amlodipine (Norvasc) diltiazem (Cardizem) diltiazem ER capsules (Cardizem CD, Tiazac) nifedipine ER (Adalat CC, Procardia XL) verapamil (Calan) verapamil ER tablets (Calan SR)	<i>diltiazem ER tablets (Cardizem LA)</i> <i>felodipine (Plendil)</i> <i>isradipine (Dynacirc)</i> <i>nicardipine (Cardene)</i> <i>nifedipine (Adalat, Procardia)</i> <i>nimodipine (Nimotop)</i> <i>nisoldipine (Sular)</i> <i>verapamil ER capsules (Verelan, Verelan PM)</i> <i>Katerzia</i> <i>Nymalize</i>
Lipotropics, Other	cholestyramine (Questran) colestipol tablet (Colestid) ezetimibe (Zetia) fenofibrate nanocrystals (Tricor) gemfibrozil (Lopid) niacin ER (Niaspan)	<i>colesevelam (Welchol)</i> <i>colestipol granules (Colestid)</i> <i>fenofibrate (Antara, Fenoglide, Lipofen, Lofibra, Triglide)</i> <i>fenofibric acid (Fibrincor, Trilipix)</i> <i>omega-3 ethyl esters (Lovaza)</i> <i>Juxtapid</i> <i>Praluent^{cc}</i> <i>Repatha^{cc}</i> <i>Vascepa</i>
Lipotropics, Statins	atorvastatin (Lipitor) lovastatin (Mevacor) pravastatin (Pravachol) rosuvastatin (Crestor) simvastatin (Zocor)	<i>amlodipine/atorvastatin (Caduet)</i> <i>ezetimibe/simvastatin (Vytorin)</i> <i>fluvastatin, fluvastatin ER (Lescol, Lescol XL)</i> <i>Altoprev</i> <i>Ezallor Sprinkle</i> <i>Livalo</i> <i>Zypitamag</i>
Platelet Aggregation Inhibitors	clopidogrel (Plavix) ^{ql} dipyridamole (Persantine) ^{ql} prasugrel (Effient) ^{ql} Brilinta ^{ql}	<i>aspirin/dipyridamole (Aggrenox)^{ql}</i> <i>Yosprala</i> <i>Zontivity</i>

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CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
PAH Agents, Oral and Inhaled	ambrisentan (Letairis) bosentan tablets (Tracleer) sildenafil tablets (Revatio) ^{cc,ql}	<i>tadalafil (Adcirca)</i> ^{cc,ql} <i>Adempas</i> <i>Opsumit</i> ^{cc,ql} <i>Orenitram ER</i> ^{cc,ql} <i>Revatio suspension (Brand only)</i> ^{cc,ql} <i>Tracleer tablets for suspension</i> <i>Tyvaso</i> ^{cc} <i>Uptravi</i> ^{cc,ql} <i>Ventavis</i>

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CENTRAL NERVOUS SYSTEM

THE MENTAL HEALTH FORMULARY CAN BE FOUND AT THE LINK [HERE](#)

Drug Class	Preferred	Requires Prior Authorization
Anticonvulsants	carbamazepine (Tegretol) carbamazepine ER (Carbatrol ER) clobazam tablets (Onfi) ^{ql} clonazepam (Klonopin) diazepam rectal (Diastat, Diastat, Acudial) divalproex, divalproex ER (Depakote, Depakote ER) divalproex sprinkles (Depakote sprinkles) lamotrigine (Lamictal) levetiracetam tablets, solution (Keppra) oxcarbazepine tablets, suspension (Trileptal) phenobarbital phenytoin, phenytoin ER (Dilantin, Dilantin Infatabs, Phenytek) primidone (Mysoline) topiramate (Topamax) topiramate sprinkles (Topamax Sprinkles) valproic acid (Depakene) zonisamide (Zonegran) Gabitril (Brand only) Tegretol suspension (Brand only) Vimpat ^{ql}	<i>carbamazepine suspension (Tegretol) (generic only)</i> <i>carbamazepine XR (Tegretol XR)</i> <i>clobazam suspension(Onfi)^{cc,ql}</i> <i>clonazepam ODT (Klonopin ODT)</i> <i>ethosuximide (Zarontin)</i> <i>felbamate (Felbatol)</i> <i>lamotrigine dose pack</i> <i>lamotrigine XR (Lamictal XR)</i> <i>lamotrigine ODT (Lamictal ODT)</i> <i>levetiracetam ER (Keppra XR)</i> <i>tiagabine (Gabitril) (generic only)</i> <i>topiramate ER (Qudexy XR)^{cc,ql}</i> <i>Aptom^{cc}</i> <i>Banzel^{cc,ql}</i> <i>Briviact</i> <i>Celontin</i> <i>Diacomit capsules, powder pack</i> <i>Epidiolex^{cc,ql}</i> <i>Equetro</i> <i>Fycompa^{cc}</i> <i>Lamictal XR dose pack</i> <i>Nayzilam</i> <i>Oxtellar XR</i> <i>Peganone</i> <i>Sabril powder pack, tablets (Brand only)</i> <i>Spritam</i> <i>Sympazan^{cc,ql}</i> <i>Trokendi XR</i>

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CENTRAL NERVOUS SYSTEM

THE MENTAL HEALTH FORMULARY CAN BE FOUND AT THE LINK [HERE](#)

Drug Class	Preferred	Requires Prior Authorization
Antidepressants, Other	bupropion, bupropion SR, bupropion XL (Wellbutrin, Wellbutrin SR, Wellbutrin XL) mirtazapine, mirtazapine ODT (Remeron, Remeron ODT) trazodone (Desyrel) venlafaxine (Effexor) venlafaxine ER capsules (Effexor XR)	<i>bupropion XL (Forfivo XL)</i> <i>desvenlafaxine ER (Khedezla, Pristiq)</i> <i>desvenlafaxine fumarate ER</i> <i>nefazodone (Serzone)</i> <i>phenelzine (Nardil)</i> <i>tranylcypromine (Parnate)</i> <i>venlafaxine ER tablets</i> <i>Aplenzin</i> <i>Emsam</i> <i>Fetzima</i> <i>Marplan</i> <i>Spravato</i> <i>Trintellix</i> <i>Viibryd</i> <i>Zulresso</i>
Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs)	citalopram tablets, solution (Celexa) escitalopram tablets (Lexapro) fluoxetine capsules, solution (all strengths except 60mg) (Prozac) fluvoxamine (Luvox) paroxetine (Paxil) sertraline tablets, concentrated solution (Zoloft)	<i>escitalopram solution (Lexapro)</i> <i>fluoxetine capsules 60mg</i> <i>fluoxetine tablets (Sarafem)</i> <i>fluoxetine weekly (Prozac weekly)</i> <i>fluvoxamine ER (Luvox CR)</i> <i>paroxetine CR (Paxil CR)</i> <i>paroxetine 7.5mg capsules (Brisdelle)</i> <i>Paxil suspension</i> <i>Pexeva</i>
Anti-Migraine Agents, Other *Excluded from the Mental Health Formulary.	Ajovy (Step Therapy) Emgality 120mg/mL (Step Therapy)	Aimovig (Step Therapy) Emgality 100mg/mL (Step Therapy) Nurtec ODT Reyvow Ubrelvy

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CENTRAL NERVOUS SYSTEM

THE MENTAL HEALTH FORMULARY CAN BE FOUND AT THE LINK [HERE](#)

Drug Class	Preferred	Requires Prior Authorization
Antipsychotics	1st Tier	<i>clozapine ODT (Fazaclor)^{cc}</i> <i>olanzapine/fluoxetine (Symbax)^{cc,ql}</i> <i>paliperidone (Invega)^{cc,ql}</i> <i>Abilify MyCite^{cc}</i> <i>Adasuve^{cc}</i> <i>Fanapt^{cc,ql}</i> <i>Nuplazid^{cc,ql}</i> <i>Perseris^{cc,ql}</i> <i>Rexulti^{cc,ql}</i> <i>Saphris^{cc,ql}</i> Secuado^{cc} <i>Versacloz^{cc}</i> <i>Vraylar^{cc,ql}</i> <i>Zyprexa Relprevv^{cc,ql}</i>
Antipsychotic Review Programs	aripiprazole (Abilify) ^{ql} aripiprazole ODT(Abilify Discmelt) ^{ql} chlorpromazine (Thorazine) clozapine (Clozaril) fluphenazine (Prolixin) fluphenazine decanoate inj (Prolixin Inj.) ^{ql} haloperidol (Haldol) haloperidol decanoate inj (Haldol IM) ^{ql} loxapine capsules (Loxitane) olanzapine IM (Zyprexa IM) ^{ql} olanzapine ODT (Zyprexa Zydis) ^{ql} olanzapine tablets (Zyprexa) ^{ql} perphenazine (Trilafon) perphenazine/amitriptyline (Triavil) pimozide (Orap) quetiapine (Seroquel) ^{ql} quetiapine ER (Seroquel XR) ^{ql} risperidone, risperidone ODT (Risperdal) ^{ql} thioridazine (Mellaril) thiothixene (Navane) trifluoperazine (Stelazine) ziprasidone (Geodon) ^{ql} ziprasidone IM (Geodon IM) Abilify Maintena ^{ql} Aristada ^{ql} Aristada Initio ^{ql} Invega Sustenna ^{ql} Invega Trinza ^{cc,ql} Risperdal Consta ^{ql} 2nd Tier Latuda ^{cc,ql}	

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CENTRAL NERVOUS SYSTEM

THE MENTAL HEALTH FORMULARY CAN BE FOUND AT THE LINK [HERE](#)

Drug Class	Preferred	Requires Prior Authorization
Sedative Hypnotics	flurazepam (Dalmane) ql temazepam 15mg, 30mg (Restoril) ql triazolam (Halcion) ql zaleplon (Sonata) ql zolpidem (Ambien) ql	doxepin (Silenor) estazolam (ProSom) ql eszopiclone (Lunesta)(Step Therapy) ql temazepam 7.5mg, 22.5mg ql ramelteon (Rozerem) ql zolpidem SL (Intermezzo) ql zolpidem ER (Ambien CR) Belsomra cc,ql Edluar ql Hetlioz cc,ql
Stimulants and Related Agents	1st Tier amphetamine salt combo (Adderall) amphetamine salt combo ER (Adderall XR) clonidine ER tablets (Kapvay) cc,ql dexmethylphenidate tablets (Focalin) dextroamphetamine capsules (Dexedrine ER) dextroamphetamine tablets guanfacine ER (Intuniv) cc,ql methylphenidate CD capsules (Metadate CD) methylphenidate CR tablets (All strengths except 72mg) (Concerta) methylphenidate ER capsules (Ritalin LA) methylphenidate ER tablets (Ritalin SR) methylphenidate oral solution (Methyltin) methylphenidate tablets (Ritalin) Daytrana Focalin XR (Brand only) Quillivant XR Vyvanse Vyvanse chewable tablets cc 2nd Tier atomoxetine (Strattera) cc	amphetamine ER suspension (Adzenys ER) amphetamine sulfate (Evekeo) armodafinil (Nuvigil) cc,ql dexmethylphenidate XR (Focalin XR) (generic only) dextroamphetamine solution (Procentra) methamphetamine (Desoxyn) methylphenidate chewable (Methyltin chewable) methylphenidate CR tablets 72mg modafinil (Provigil) cc,ql Adhansia XR Adzenys XR ODT cc Aptensio XR Cotempla XR ODT Dyanavel XR Evekeo ODT Jornay PM Mydayis ER Quillichew ER Sonusi Wakix Zenedzi

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ENDOCRINE

Drug Class	Preferred	Requires Prior Authorization
Androgenic Agents	testosterone gel pump (Androgel) Androderm ^{cc ql}	<i>testosterone gel packet (Androgel)</i> <i>testosterone gel (Testim)</i> <i>testosterone gel (Vogelxo)</i> <i>testosterone gel pump (Axiron)</i> <i>testosterone gel pump (Fortesta)</i>
Bone Resorption Suppression and Related Agents	alendronate tablets (Fosamax) ^{ql} calcitonin salmon nasal (Miacalcin) ^{ql}	<i>alendronate solution (Fosamax Solution)^{ql}</i> <i>ibandronate (Boniva)^{ql}</i> <i>raloxifene (Evista)^{ql}</i> <i>risedronate (Actonel, Atelvia)^{ql}</i> <i>teriparatide^{cc ql}</i> <i>Binosto^{ql}</i> <i>Evenity</i> <i>Forsteo^{cc ql}</i> <i>Fosamax Plus D^{ql}</i> <i>Prolia^{cc ql}</i> <i>Tymlos^{cc ql}</i>
Growth Hormone	Genotropin ^{cc} Norditropin ^{cc} Nutropin AQ ^{cc}	<i>Humatrop^{cc}</i> <i>Omnitrope^{cc}</i> <i>Saizen^{cc}</i> <i>Serostim^{cc}</i> <i>Zomacton^{cc}</i> <i>Zorbtive^{cc}</i>
Hypoglycemics, Incretin Mimetics and Enhancers	Bydureon Byetta Glyxambi ^{cc ql} Janumet, Janumet XR Januvia Jentadueto Onglyza Symlin Tradjenta Trulicity Victoza ^{ql}	<i>alogliptin (Nesina)</i> <i>alogliptin/metformin (Kazano)</i> <i>alogliptin/pioglitazone (Oseni)</i> <i>Adlyxin</i> <i>Bydureon BCise</i> <i>Jentadueto XR</i> <i>Kombiglyze XR</i> <i>Ozempic</i> <i>Qtern^{cc ql}</i> <i>Rybelsus</i> <i>Soliqua</i> <i>Steglujan^{cc ql}</i> <i>Xultophy</i>

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ENDOCRINE

Drug Class	Preferred	Requires Prior Authorization
Hypoglycemics, Insulins	Humalog cartridge Humalog Junior Kwikpen (Brand only) Humalog Mix 50/50 pen, vial Humalog Mix 75/25 pen (Brand only) Humalog Mix 75/25 vial Humalog pen, vial (Brand only) Humulin pen, vial Humulin 70/30 vial Lantus Levemir Novolin pen Novolog (Brand only) Novolog Mix 70/30 (Brand only)	<i>insulin aspart (Novolog) (generic only)</i> <i>insulin aspart protamine/insulin aspart (Novolog Mix) (generic only)</i> <i>insulin lispro Junior Kwikpen (Humalog Junior Kwikpen) (generic only)</i> <i>insulin lispro mix pen (Humalog Mix 75/25) (generic only)</i> <i>insulin lispro pen, vial (Humalog) (generic only)</i> Admelog AfreZZA Apidra Basaglar Fiasp <i>Humalog 200 unit/mL pen</i> <i>Humulin 70/30 pen</i> <i>Novolin vial</i> <i>Novolin 70/30</i> <i>Toujeo SoloStar, Toujeo Max Solostar</i> <i>Tresiba</i>
Hypoglycemics, Meglitinides	nateglinide (Starlix) repaglinide (Prandin)	<i>repaglinide/metformin (Prandimet)</i>
Hypoglycemics, Metformins	glipizide/metformin (Metaglip) glyburide/metformin (Glucovance) metformin (Glucophage) metformin ER (Glucophage XR)	<i>metformin ER (Fortamet)</i> cc ql <i>metformin ER (Glumetza)</i> cc ql <i>metformin solution (Riomet)</i> <i>Riomet ER suspension</i>
Hypoglycemics, SGLT2 Inhibitors	Farxiga (Step Therapy) cc ql Invokana (Step Therapy) cc ql Jardiance (Step Therapy) cc ql	<i>Invokamet (Step Therapy)</i> cc ql <i>Invokamet XR (Step Therapy)</i> cc ql <i>Segluromet (Step Therapy)</i> cc ql <i>Steglatro (Step Therapy)</i> cc ql <i>Synjardy (Step Therapy)</i> cc ql <i>Synjardy XR (Step Therapy)</i> cc ql <i>Xigduo XR (Step Therapy)</i> cc ql
Hypoglycemics, TZDs	pioglitazone (Actos) pioglitazone/metformin (ActoPlusMet)	<i>pioglitazone/glimepiride (Duetact)</i> <i>ActoPlusMet XR</i> <i>Avandia</i>

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GASTROINTESTINAL

Drug Class	Preferred	Requires Prior Authorization
Antiemetic/Antivertigo Agents	dimenhydrinate OTC meclizine Rx, OTC (Bonine, Antivert) metoclopramide (Reglan) ondansetron, ondansetron ODT (Zofran) ^{ql} prochlorperazine tablets (Compazine) promethazine injectable, solution, tablets (Phenergan) promethazine suppositories (except 50mg) scopolamine patches (TransDerm Scop) (Brand and generic)	<i>aprepitant capsules, tripack (Emend)^{ql}</i> <i>dimenhydrinate Rx</i> <i>doxylamine/pyridoxine (Diclegis)^{cc,ql}</i> <i>dronabinol (Marinol)^{cc,ql}</i> <i>fosaprepitant dimeglumine IV (Emend)</i> <i>granisetron (Kytril)^{ql}</i> <i>metoclopramide ODT (Metozolv ODT)</i> <i>palonosetron (Aloxi)</i> <i>prochlorperazine injectable, suppositories (Compro)</i> <i>promethazine 50mg suppositories</i> <i>trimethobenzamide (Tigan)</i> <i>Akynzeo capsules^{cc}</i> <i>Akynzeo IV</i> <i>Bonjesta</i> <i>Cinvanti</i> <i>Emend powder packets^{ql}</i> <i>Sancuso^{ql}</i> <i>Sustol</i> <i>Varubi</i> <i>Zuplenz</i>
Bile Salts	ursodiol capsules (Actigall) ursodiol tablets (URSO, URSO Forte)	<i>Chenodal</i> <i>Cholbam</i> <i>Ocaliva</i>
GI Motility, Chronic	Amitiza ^{cc,ql} Linzess ^{cc,ql} Movantik ^{cc,ql}	<i>alosetron (Lotronex)</i> <i>Motegrity^{cc,ql}</i> <i>Relistor^{cc,ql}</i> <i>Symproic^{cc,ql}</i> <i>Trulance^{cc,ql}</i> <i>Viberzi</i>
Pancreatic Enzymes	Creon ^{ql} Zenpep ^{ql}	<i>Pancreaze^{ql}</i> <i>Pertzye^{ql}</i> <i>Viokace^{ql}</i>

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GASTROINTESTINAL

Drug Class	Preferred	Requires Prior Authorization
Proton Pump Inhibitors	esomeprazole packet for suspension (Nexium) lansoprazole capsules (Prevacid) omeprazole capsules (Prilosec) pantoprazole (Protonix) Prevacid Solutab (Brand only) Protonix suspension	<i>esomeprazole magnesium (Nexium)</i> <i>esomeprazole OTC</i> <i>lansoprazole OTC</i> <i>lansoprazole ODT (generic only)</i> <i>omeprazole OTC</i> <i>omeprazole/sodium bicarb (Zegerid)</i> <i>rabeprazole (Aciphex)</i> <i>Aciphex Sprinkles</i> <i>Dexilant</i> <i>Esomep-EZS</i> <i>Prilosec suspension</i>
Ulcerative Colitis Agents	balsalazide (Colazal) mesalamine enema (sfRowasa) sulfasalazine, sulfasalazine DR (Azulfidine, Azulfidine DR) Pentasa	<i>budesonide ER (Uceris)</i> <i>mesalamine (Lialda)</i> <i>mesalamine ER (Apriso)</i> <i>mesalamine DR (Delzicol)</i> <i>mesalamine HD (Asacol HD)</i> <i>mesalamine rectal kit (Rowasa)</i> <i>mesalamine rectal (Canasa)</i> <i>Dipentum</i> <i>Uceris Rectal</i>

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IMMUNOLOGICS

Drug Class	Preferred	Requires Prior Authorization
Cytokine and CAM Antagonists	Enbrel Humira Otezla (Step Therapy) cc ql	Actemra cc Arcalyst cc Cimzia cc Cosentyx cc Entyvio cc Ilaris cc Illumya cc Inflectra cc Kevzara cc Kineret cc Olumiant cc Orencia cc ql Remicade cc Renflexis cc Rinvoq ER cc Siliq cc Simponi cc Skyrizi cc Stelara cc ql Taltz cc ql Tremfya cc Xeljanz, Xeljanz XR cc ql
Immunosuppressives, Oral	azathioprine (Imuran) cyclosporine modified capsules, solution (Neoral) mycophenolic acid (Myfortic) mycophenolate mofetil capsules, tablets (Cellcept) sirolimus (Rapamune) tacrolimus (Prograf) Cellcept suspension (Brand only)	cyclosporine capsules (Sandimmune) cyclosporine modified Softgel (Gengraf) everolimus (Zortress) mycophenolate mofetil suspension (generic only) Astagraf XL Envarsus XR Prograf Granules Pack Sandimmune solution

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NEUROLOGICS

Drug Class	Preferred	Requires Prior Authorization
Alzheimer's Agents	donepezil, donepezil ODT (all strengths except 23mg) (Aricept, Aricept ODT) memantine (Namenda) rivastigmine capsules, patches (Exelon) ^{ql}	<i>donepezil 23mg (Aricept)</i> <i>galantamine, galantamine ER (Razadyne, Razadyne ER)</i> <i>memantine dose pack</i> <i>memantine solution</i> <i>memantine ER (Namenda XR)</i> <i>Namzaric, Namzaric dose pack</i>
Anti-Parkinson's Agents	amantadine (Symmetrel) benztropine (Cogentin) carbidopa/levodopa IR (Sinemet) carbidopa/levodopa ER (Sinemet CR) carbidopa/levodopa/entacapone (Stalevo) pramipexole (Mirapex) ropinirole (Requip) selegiline (Eldepryl) trihexyphenidyl (Artane)	<i>bromocriptine (Parlodel)</i> <i>carbidopa (Lodosyn)</i> <i>carbidopa/levodopa ODT (Parcopa)</i> <i>entacapone (Comtan)</i> <i>pramipexole ER (Mirapex ER)</i> <i>rasagiline (Azilect)</i> <i>ropinirole ER (Requip XL)</i> <i>tolcapone (Tasmar)</i> <i>Duopa</i> <i>Gocovri</i> <i>Inbrija</i> <i>Neupro</i> Nourianz <i>Osmolex ER</i> <i>Rytary</i> <i>Xadago</i> <i>Zelapar</i>
Multiple Sclerosis Agents	Avonex Betaseron kit Copaxone 20mg (Brand only)	<i>dalfampridine ER (Ampyra) ^{cc,ql}</i> glatiramer acetate 20mg (Glatopa) (generic only) <i>glatiramer acetate 40mg (Copaxone)</i> <i>Aubagio^{cc,ql}</i> <i>Extavia kit^{cc}</i> <i>Gilenya^{cc,ql}</i> <i>Lemtrada^{cc}</i> <i>Mavenclad^{cc}</i> <i>Mayzent</i> <i>Ocrevus^{cc,ql}</i> <i>Plegridy^{cc}</i> Rebif <i>Tecfidera^{cc,ql}</i> <i>Tysabri</i> Vumerity

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OPHTHALMICS

Drug Class	Preferred	Requires Prior Authorization
Ophthalmics, Allergic Conjunctivitis	cromolyn (Crolom) ketotifen OTC (Zaditor OTC) Alrex Pazeo	<i>azelastine (Optivar)</i> <i>epinastine (Elestat)</i> <i>olopatadine (Pataday, Patanol)</i> <i>Alocril</i> <i>Alomide</i> <i>Bepreve</i> <i>Lastacraft</i>
Ophthalmics, Antibiotics	bacitracin/polymyxin B ointment ciprofloxacin solution (Ciloxan) erythromycin gentamicin (Garamycin) moxifloxacin (Moxela, Vigamox) neomycin/bacitracin/polymyxin ointment ofloxacin (Ocuflox) polymyxin(trimethoprim (Polytrim) sulfacetamide solution (Bleph-10) tobramycin (Tobrex Drops) Ciloxan ointment Tobrex ointment	<i>bacitracin</i> <i>gatifloxacin (Zymaxid)</i> <i>gentamicin ointment</i> <i>levofloxacin (Quixin)</i> <i>neomycin/polymyxin/gramicidin (Neosporin)</i> <i>sulfacetamide ointment</i> <i>AzaSite</i> <i>Besivance</i> <i>Natacyn</i>
Ophthalmics, Antibiotic/Steroid Combinations	neomycin/polymyxin/dexamethasone (Maxitrol) sulfacetamide/prednisolone tobramycin/dexamethasone drops (Tobradex) Tobradex ointment	<i>neomycin/bacitracin/polymyxin/hydrocortisone</i> <i>neomycin/polymyxin/hydrocortisone</i> <i>Blephamide, Blephamide S.O.P.</i> <i>Pred-G</i> <i>Tobradex ST</i> <i>Zylet</i>
Ophthalmics, Glaucoma Agents	brimonidine (Alphagan P) carteolol (Ocupress) dorzolamide (Trusopt) dorzolamide/timolol (Cosopt) latanoprost (Xalatan) levobunolol (Betagan) pilocarpine (Pilocar) timolol (Timoptic, Timoptic XE) travoprost (Travatan Z) Combigan Rhopressa	<i>apraclonidine (Iopidine)</i> <i>betaxolol</i> <i>bimatoprost 0.03% (Lumigan)</i> <i>timolol (Istalol)</i> <i>Azopt</i> <i>Betoptic S</i> <i>Cosopt PF</i> <i>Lumigan 0.01%</i> <i>Phospholine Iodide</i> <i>Rocklatan</i> <i>Simbrinza</i> <i>Timoptic Ocudose</i> <i>Vyzulta</i> <i>Xelpros</i> <i>Zioptan</i>

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OPHTHALMICS

Drug Class	Preferred	Requires Prior Authorization
Ophthalmics, Anti-Inflammatories	diclofenac (Voltaren) fluorometholone (FML) ketorolac (Acular) prednisolone acetate (Pred Forte) Durezol Ilevro Pred Mild	<i>bromfenac (Xibrom)</i> <i>dexamethasone (Decadron)</i> <i>flurbiprofen (Ocufen)</i> <i>ketorolac LS (Acular LS)</i> <i>loteprednol (Lotemax drops)</i> <i>prednisolone sodium</i> <i>Acuvail</i> <i>Bromsite</i> <i>Dextenza</i> <i>Dexycu</i> <i>Flarex</i> <i>FML Forte</i> <i>FML SOP</i> <i>Iluvien</i> <i>Inveltys</i> <i>Lotemax gel, ointment</i> <i>Maxidex</i> <i>Nevanac</i> <i>Ozurdex</i> <i>Prolensa</i> <i>Retisert</i> <i>Triesence</i> <i>Yutiq</i>
Ophthalmics, Anti-Inflammatory/ Immunomodulator	Restasis multidose Restasis single-use	<i>Cequa</i> <i>Xiidra</i>

OTIC

Drug Class	Preferred	Requires Prior Authorization
Otic Antibiotics	neomycin/polymyxin/HC (Cortisporin) ofloxacin otic (Floxin Otic) Ciprodex	<i>ciprofloxacin</i> <i>Cipro HC</i> <i>Coly-Mycin S</i> <i>Cortisporin TC</i> <i>Otiprio</i> <i>Otovel</i>

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RESPIRATORY

Drug Class	Preferred	Requires Prior Authorization
Antihistamines, Minimally Sedating	cetirizine, cetirizine D tablets, solution, Rx, OTC (Zyrtec, Zyrtec D) fexofenadine tablets, suspension OTC (Allegra OTC) levocetirizine tablets (Xyzal) loratadine, loratadine D, loratadine ODT; Rx, OTC (Claritin, Claritin D)	<i>cetirizine capsules, chewable, 5mg/5mL solution OTC</i> <i>desloratadine, desloratadine ODT (Clarinet, Clarinex RDT)</i> <i>fexofenadine ODT OTC</i> <i>fexofenadine D OTC (Allegra D)</i> <i>levocetirizine solution (Xyzal)</i> <i>loratadine capsule OTC</i> <i>Clarinex D</i> Quzyttir <i>Semprex D</i>
Bronchodilators, Beta Agonists	albuterol neb 0.083%, 5mg/ml albuterol neb 0.63mg/3ml, 1.25mg/3ml (AccuNeb) albuterol syrup (Proventil, Ventolin) ProAir HFA (Brand only) ^{al} Serevent	<i>albuterol tablets</i> <i>albuterol ER (Vospire ER)</i> <i>albuterol HFA (ProAir HFA) (generic only)^{al}</i> <i>albuterol HFA (Proventil, Ventolin HFA)^{al}</i> <i>levalbuterol neb (Xopenex)</i> <i>levalbuterol HFA (Xopenex HFA)^{al}</i> <i>metaproterenol (Alupent)</i> <i>terbutaline (Brethine)</i> <i>Arcapta Neohaler</i> <i>Brovana</i> <i>Perforomist</i> ProAir Digihaler <i>ProAir Respclick^{al}</i> <i>Striverdi Respimat</i>

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RESPIRATORY

Drug Class	Preferred	Requires Prior Authorization
COPD Agents	ipratropium neb (Atrovent) ipratropium/albuterol neb (DuoNeb) Atrovent HFA Combivent Respimat ^{gl} Spiriva Handihaler Stiolto Respimat	<i>Anoro Ellipta</i> <i>Bevespi Aerosphere</i> <i>Daliresp</i> <i>Duaklir Pressair</i> <i>Incruse Ellipta</i> <i>Lonhala Magnair</i> <i>Seebri Neohaler</i> <i>Spiriva Respimat</i> <i>Tudorza Pressair</i> <i>Utibron Neohaler</i> <i>Yupelri</i>
Glucocorticoids, Inhaled	budesonide/formoterol (Symbicort) budesonide inhalation suspension 0.25mg, 0.5mg (Pulmicort Respules) Advair HFA Asmanex Dulera Flovent HFA Pulmicort Respules 1mg (Brand only)	<i>budesonide inhalation suspension 1mg (generic only)</i> <i>fluticasone/salmeterol (Advair Diskus)</i> <i>fluticasone/salmeterol (AirDuo Respiclick)</i> <i>Alvesco</i> <i>Arnuity Ellipta</i> <i>Asmanex HFA</i> <i>Breo Ellipta</i> <i>Flovent Diskus</i> <i>Pulmicort Flexhaler^{gl}</i> <i>QVAR Redihaler</i> <i>Trelegy Ellipta</i>

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RESPIRATORY

Drug Class	Preferred	Requires Prior Authorization
Intranasal Rhinitis Agents	azelastine nasal (Astelin) fluticasone nasal (Flonase) ipratropium (Atrovent Nasal)	<i>azelastine nasal (Astepro)</i> <i>azelastine/fluticasone nasal (Dymista)</i> <i>budesonide nasal (Rhinocort Allergy OTC)</i> <i>flunisolide (Nasarel, Nasalide)</i> <i>fluticasone (Ticanase)</i> <i>mometasone nasal (Nasonex)</i> <i>olopatadine (Patanase)</i> <i>triamcinolone OTC (Nasacort OTC)</i> <i>Beconase AQ</i> <i>Flonase OTC</i> <i>Omnaris</i> <i>Qnasl</i> <i>Xhance</i> <i>Zetonna</i>
Leukotriene Modifiers	montelukast chewables, tablets (Singulair) zafirlukast (Accolate)	<i>montelukast granules (Singulair Granules)</i> <i>zileuton CR (Zyflo CR)</i> <i>Zyflo</i>
Epinephrine, Self-Injected	epinephrine 0.15mg (EpiPen Jr.) ^{ql} epinephrine 0.3mg (EpiPen) ^{ql}	<i>epinephrine 0.15mg (Adrenaclick)^{ql}</i> <i>epinephrine 0.3mg (Adrenaclick)^{ql}</i> <i>Symjepi</i>

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TOPICAL DERMATOLOGICS

Drug Class	Preferred	Requires Prior Authorization
Acne Agents, Topical	benzoyl peroxide OTC (except 9% cleanser) clindamycin (all forms except the foam and lotion) clindamycin/benzoyl peroxide (Duac) tretinoin (Avita, Retin-A) ^{cc} Azelex Differin lotion ^{cc}	<i>adapalene cream, gel, solution (Differin)^{cc}</i> <i>adapalene/benzoyl peroxide (Epiduo)</i> <i>benzoyl peroxide 9% cleanser OTC</i> <i>bp-10-1</i> <i>clindamycin foam, lotion</i> <i>clindamycin/benzoyl peroxide (Acanya, Benzaclin)</i> <i>clindamycin/tretinoin (Ziana)</i> <i>dapsone (Aczone)</i> <i>erythromycin gel, pledges</i> <i>erythromycin/benzoyl peroxide (Benzamycin)</i> <i>sulfacetamide</i> <i>sulfacetamide/sulfur</i> <i>sulfacetamide/sulfur/urea</i> <i>tazarotene cream (Tazorac)^{cc}</i> <i>tretinoin micro (Retin-A Micro)^{cc}</i> <i>AcneFree Clearing System</i> Aklierf Altreno Amzeeq Avar Clindacin <i>Differin Gel OTC</i> <i>Epiduo Forte Gel w/Pump</i> Fabior Neuac Onexton Ovace <i>Retin-A Micro 0.06%, 0.08%</i> <i>Sumaxin CP Kit</i> <i>Tazorac gel</i>
Immunomodulators, Atopic Dermatitis	tacrolimus ointment (Protopic) pimecrolimus (Elidel) Eucrisa	Dupixent

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UROLOGIC

Drug Class	Preferred	Requires Prior Authorization
BPH Treatments	alfuzosin (Uroxatral) doxazosin (Cardura) dutasteride (Avodart) finasteride (Proscar) tamsulosin (Flomax) terazosin (Hytrin)	<i>dutasteride/tamsulosin (Jalyn)</i> <i>silodosin (Rapaflo)</i> <i>Cardura XL</i>
Bladder Relaxant Preparations	oxybutynin, oxybutynin ER (Ditropan, Ditropan XL) solifenacin (Vesicare) Toviaz	<i>darifenacin ER (Enablex)</i> <i>flavoxate</i> <i>tolterodine, tolterodine ER (Detrol, Detrol LA)</i> <i>trospium, trospium ER (Sanctura, Sanctura XR)</i> <i>Gelnique</i> <i>Myrbetriq</i> <i>Oxytrol</i>

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